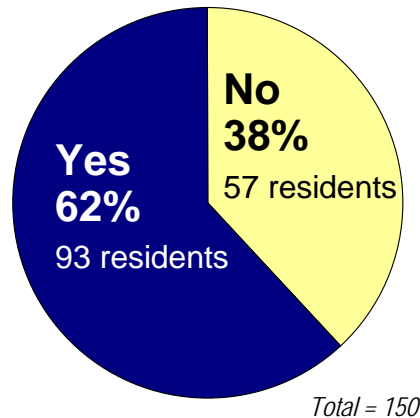


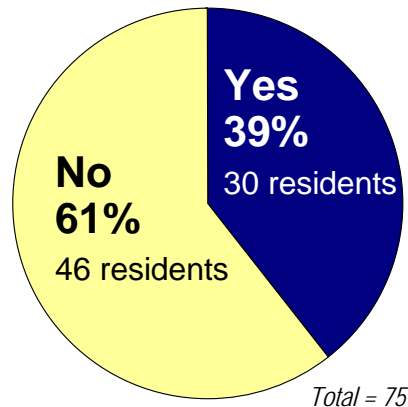
# Public Safety: DSHS Supplementary Data

## Does Civil Commitment Encourage Treatment Participation in SCC?

Of 150 Civilly  
Committed  
Residents, 62%  
Are in Treatment



Of 75 Residents  
Not Committed,  
39% are in  
treatment



### Analysis

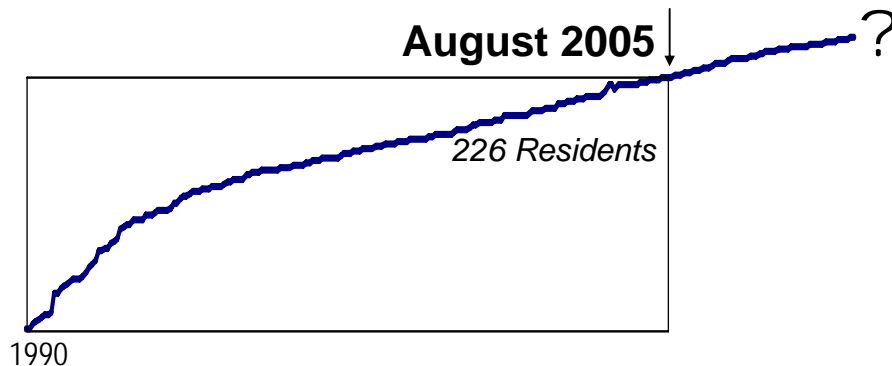
- **Yes** – Treatment participation of committed residents is **23% higher** than those who are not committed.
- Non-committed residents often resist treatment as a legal strategy.
- A residual group of committed residents resists treatment.

### Action Plan

- Increase motivational interventions to encourage residents' participation in treatment.

# Public Safety: DSHS Supplementary Data

## How Will Indeterminate Sentencing Affect SCC Admissions?



**From opening in 1990 to date, SCC population has risen steadily...**

**In recent years, SCC has had 2 or 3 admissions per month.**

**In the near term, we expect this trend to continue.**

### Analysis

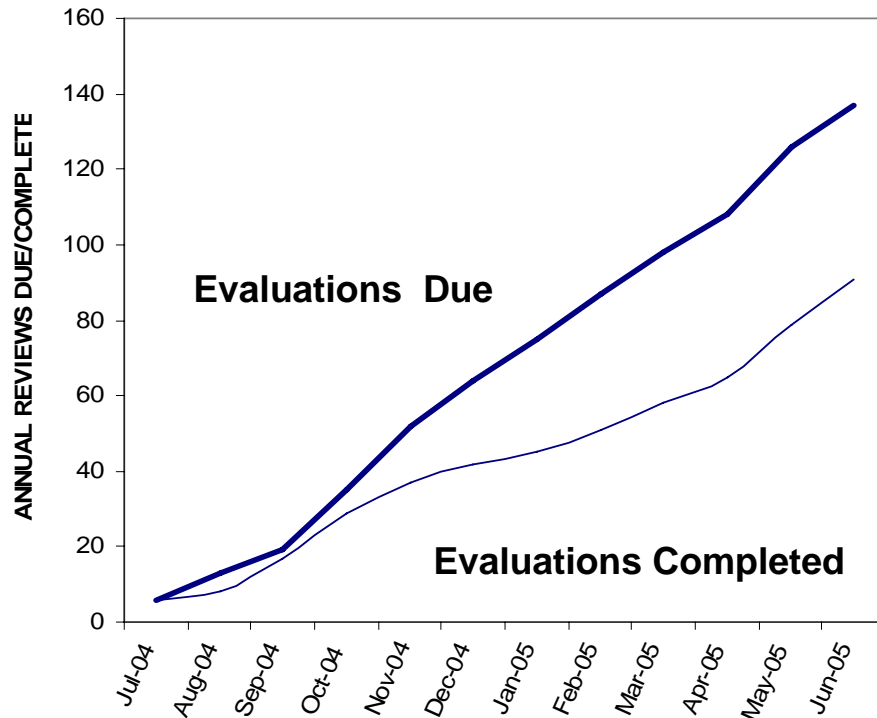
- We expect reduced admissions, but when?
- “Medium management” beds are nearing capacity. Only 16 of 144 beds are vacant – most are for special needs residents.

### Action Plan

- Complete the capital budget study on future bed needs (Dec. 2005).
- Interim Strategy: Refit “low management” unit for medium management residents.

# Public Safety: DSHS Supplementary Data

## What Happens If SCC Residents' Forensic Evaluations Are Late?



Data notes: DSHS/SCC Forensic Services

### Analysis

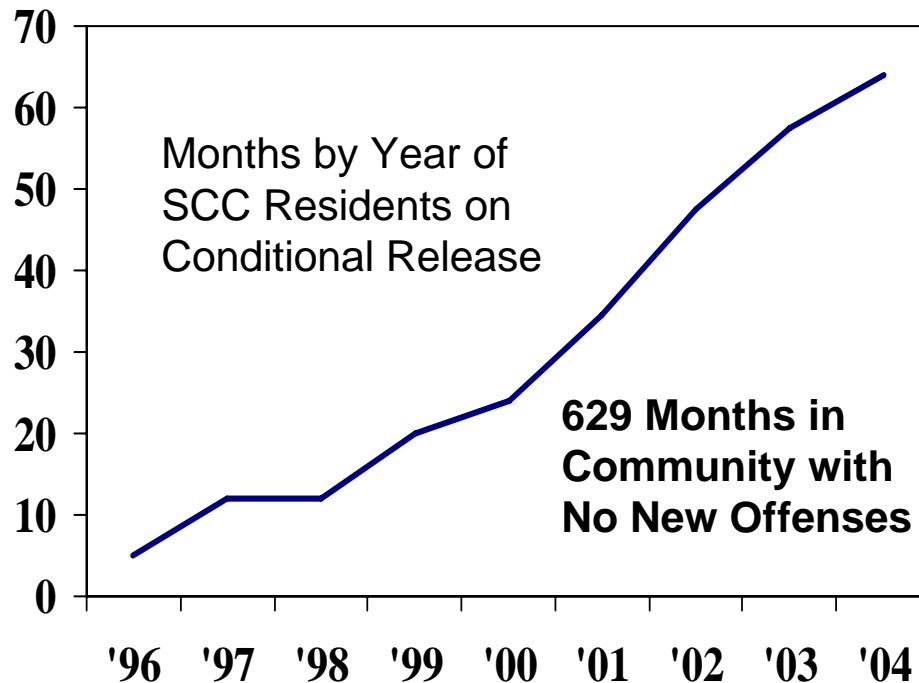
- 91 of 137 reports due in FY 05 were completed.
- As of August 2005, 56 reports are past due.
- Failure to submit reports could lead to court decisions based on incomplete information, risking release errors.

### Action Plan

- Continue efforts to recruit and retain qualified staff/contractors.
- Prioritize completion of evaluations by expected court dates.

# Public Safety: DSHS Supplementary Data

## How Do We Reduce Risk When SCC Residents Are Released?



*3 of 14 residents on release have been returned to SCC due to behavior concerns.*

### Analysis

- *Conditional Release* is the first step – joint supervision by SCC, DOC, and treatment provider.
- Careful placement, thoughtful conditions, and close supervision promote success.
- “Call-backs” are part of supervision and support community safety.

### Action Plan

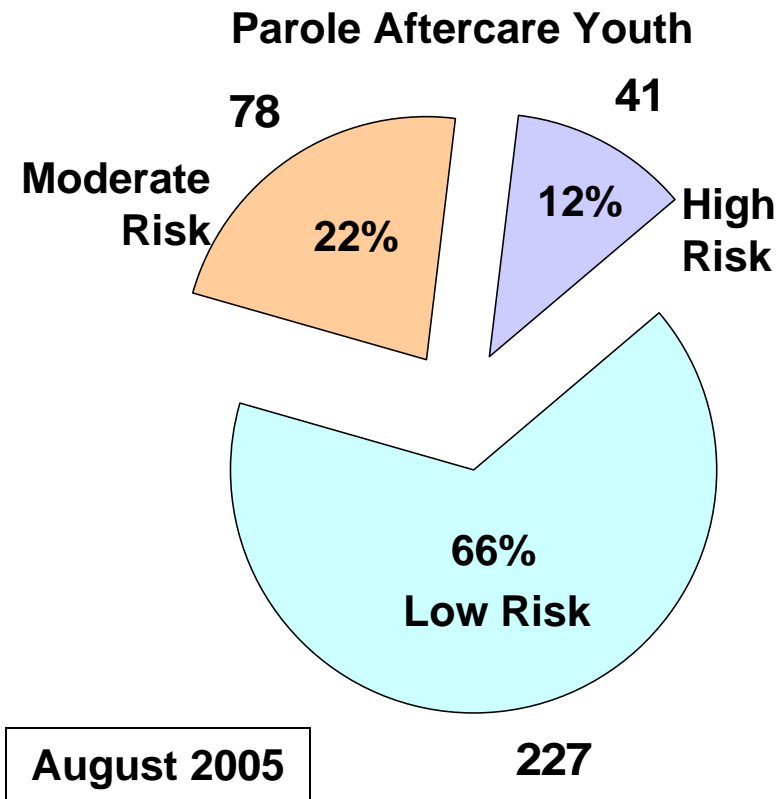
- Continue, with care, to place and supervise SCC residents in community facilities and homes.



Data notes: SCC Roster & Administrative Files, August '05

# Public Safety: DSHS Supplementary Data

## What Is the Risk Level of Offenders Supervised in JRA?



### Analysis

- 12% of JRA sex offender parolees are at the highest risk level, 22% are moderate risk

### Action plan

- Provide intensive parole supervision to highest risk sex offenders

High risk (Level 3) JRA sex offenders are automatically placed on Intensive Parole (IP) supervision for the first 26 weeks of parole; moderate risk (Level 2) and low risk (Level 1) sex offenders are placed on IP as required by Initial Community Risk Assessment. All Level 3 sex offenders receive 36 months of parole supervision.

# Public Safety: DSHS Supplementary Data

## Where Are JRA Sex Offenders Housed?

### Institutions

Echo Glen Children's Center, Snoqualmie	(34 youths)
Maple Lane School, Centralia	(59 youths)
Green Hill School, Chehalis	(38 youths)
Naselle Youth Camp, Naselle	(46 youths)

### Community Residential Facilities (Group Homes)

Oakridge, Steilacoom	(2 youths)
Twin Rivers, Richland	(4 youths)
Griffin Home, Renton*	(2 youths)
Dyslin's Boys Ranch, Tacoma*	(2 youths)

### Analysis

- 5% of JRA sex offenders are living in community facilities

### Action plan

- Continue to place only the very lowest risk sex offenders in community residential facilities

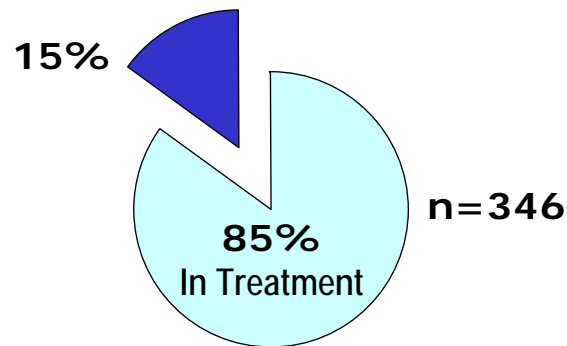
\*Contracted Facilities

August 2005



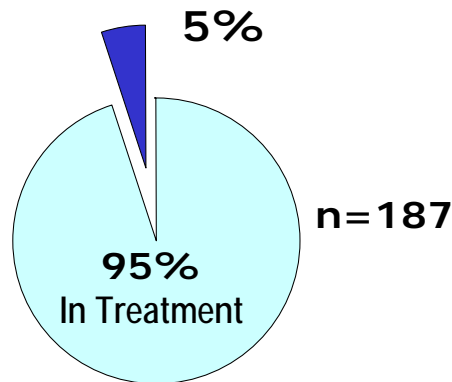
# Public Safety: DSHS Supplementary Data

## Percent of JRA Youth in Sex Offender Treatment



### Parole Aftercare

■ Treatment ■ Not in Treatment



### Residential

August 2005

### Sex Offender Treatment

- A cognitive/behavioral approach
- Individual and/or group treatment
- Services from adjudication to discharge
- Four institutions for specialized sex offender treatment
- Six parole regions with contracted sex offender therapists and JRA treatment staff
- 24 to 36 months of parole supervision for most sex offenders

### Core treatment components:

- Defining and Taking Responsibility
- Victim Empathy
- Family Support and Education
- Social Skills, Sex Education Anger/Aggression Management
- Relapse Prevention

### Elective:

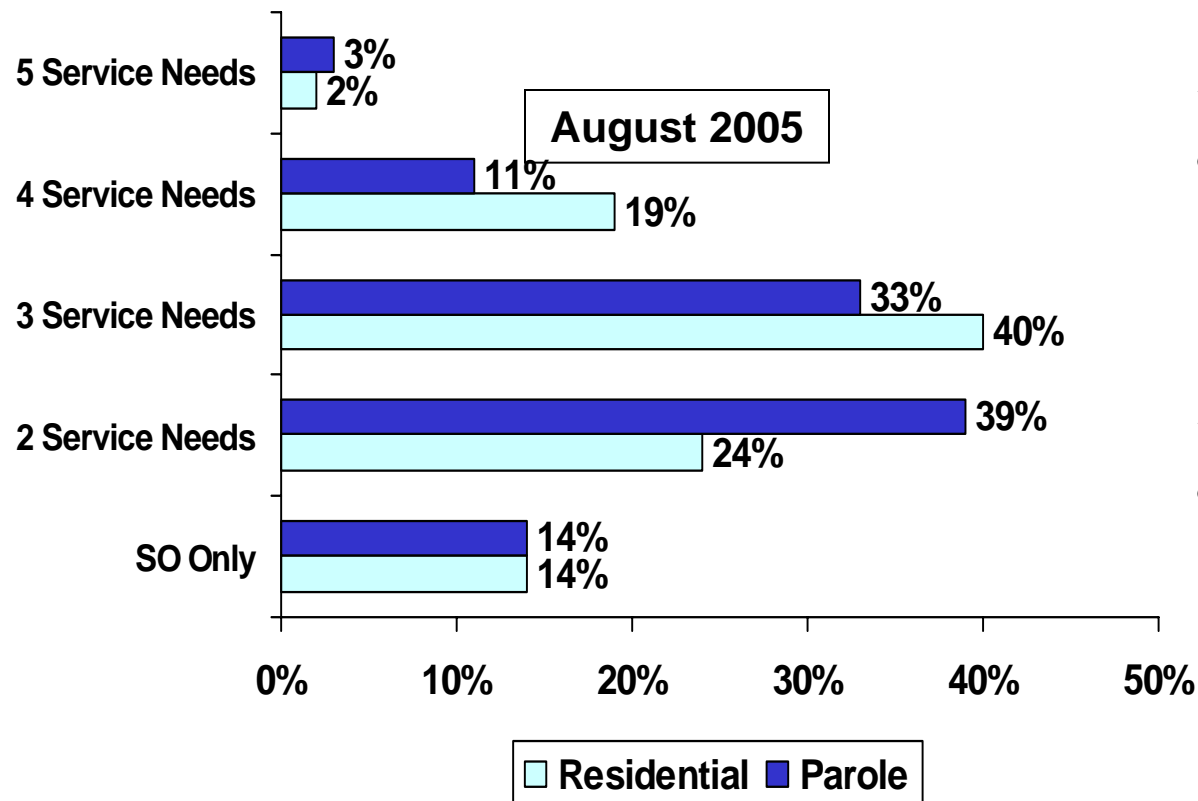
- Arousal reconditioning, Past Trauma



**Assessment and monitoring tools:** Wash. State Sex Offender Screening Tool, Sex Offender Screening Assessment, Polygraphs, Electronic monitoring

# Public Safety: DSHS Supplementary Data

## What Are the Treatment Needs of Juvenile Sex Offenders?



### Analysis

- 86% of JRA sex offenders have 2 or more treatment needs

### Action plan

- Further implementation of the Integrated Treatment Model and delivery of mental health care, chemical dependency treatment, medical care, and special needs programming

Treatment Needs: Cognitive Impairment, Medical Fragility, Chemical Dependency, Mental Health





# Public Safety: DSHS Supplementary Data

## At What Rate Do Juvenile Sex Offenders Re-Offend?

Recidivism Rates of Juvenile Sex Offenders	
Washington State youth (1998 WSIPP study)	10 – 12%
National youth (2001 OJJDP composite report)	8 – 14%

### Analysis

- Existing data indicates juvenile sex offense recidivism in Washington State is consistent with national rates
- Existing data is old

### Action plan

- Collaborate with WSIPP and DSHS research division for ongoing research and evaluation of juvenile sex offender recidivism

# Public Safety: DSHS Supplementary Data

## How Many Juvenile Sex Offenders Are Homeless?

		<u>Percent</u>
Region 1	1 of 43	2.3%
Region 2	1 of 29	3.4%
Region 3	1 of 55	2%
Region 4	5 of 43	12%
Region 5	4 of 84	8%
Region 6	1 of 92	1%
<u>TOTAL:</u>	<u>13 of 346</u>	<u>4%</u>

### Analysis

- 4% of JRA sex offenders (13) under parole supervision are homeless with the highest concentrations in King (Region 4) and Pierce (Region 5) counties

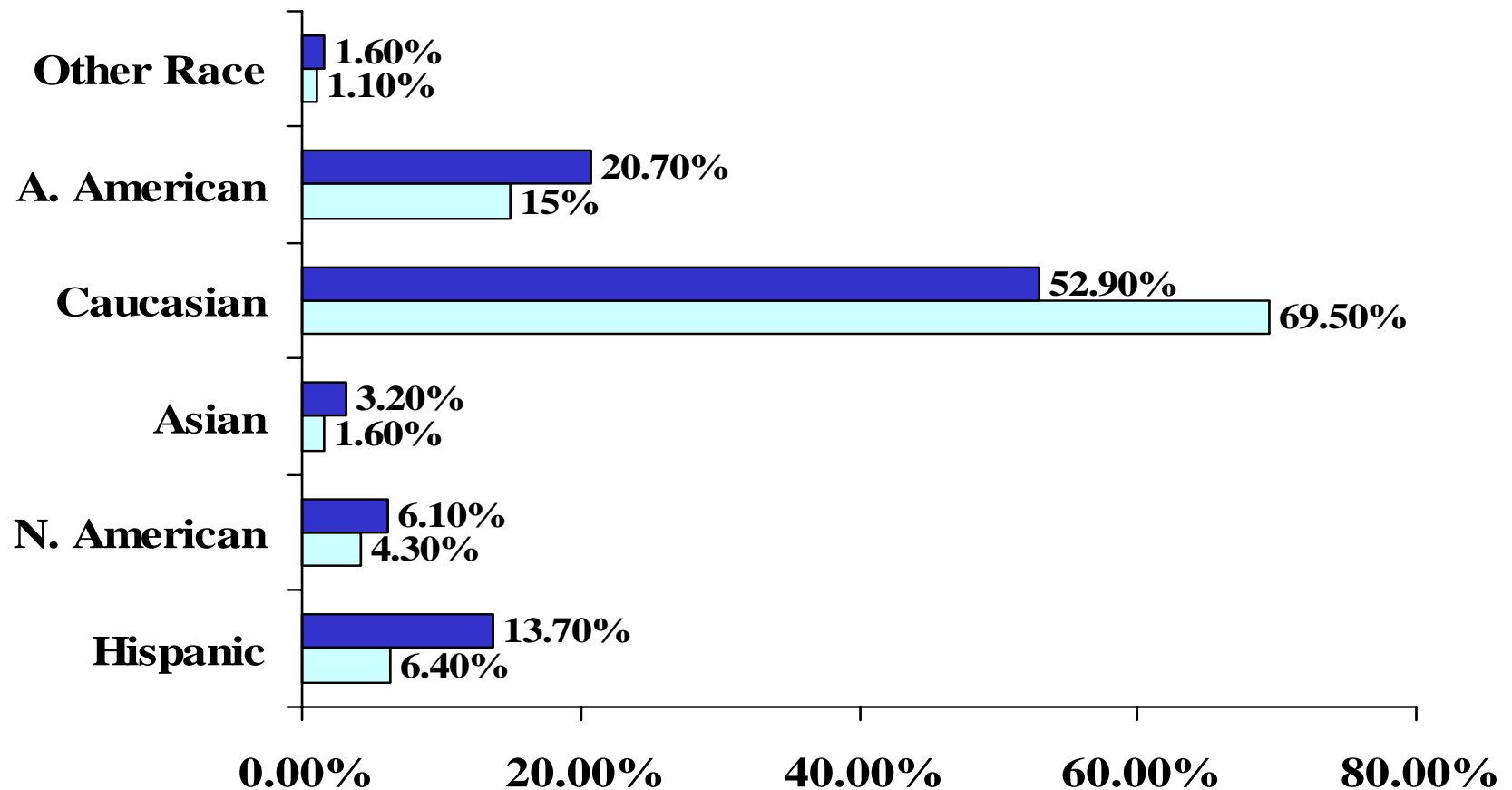
### Action plan

- Provide increased monitoring of homeless sex offenders. Assist offenders in finding housing.

August 2005

# Public Safety: DSHS Supplementary Data

## Ethnicity of Sex Offenders in JRA Residential Care



August 2005

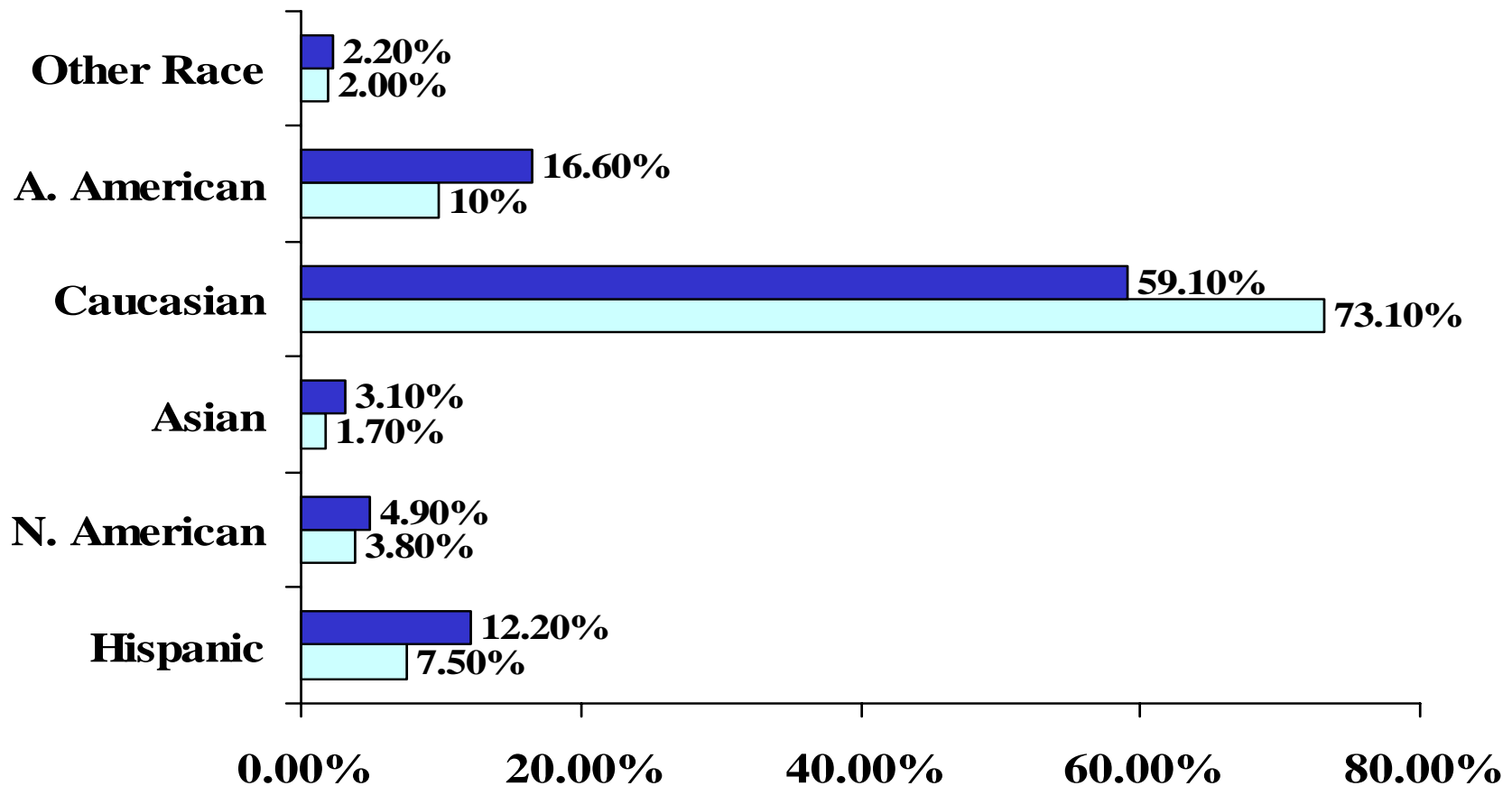
Sex Offenders All Offenders



Data source: Client Activity Tracking system

# Public Safety: DSHS Supplementary Data

## Ethnicity of Sex Offenders on JRA Parole



August 2005

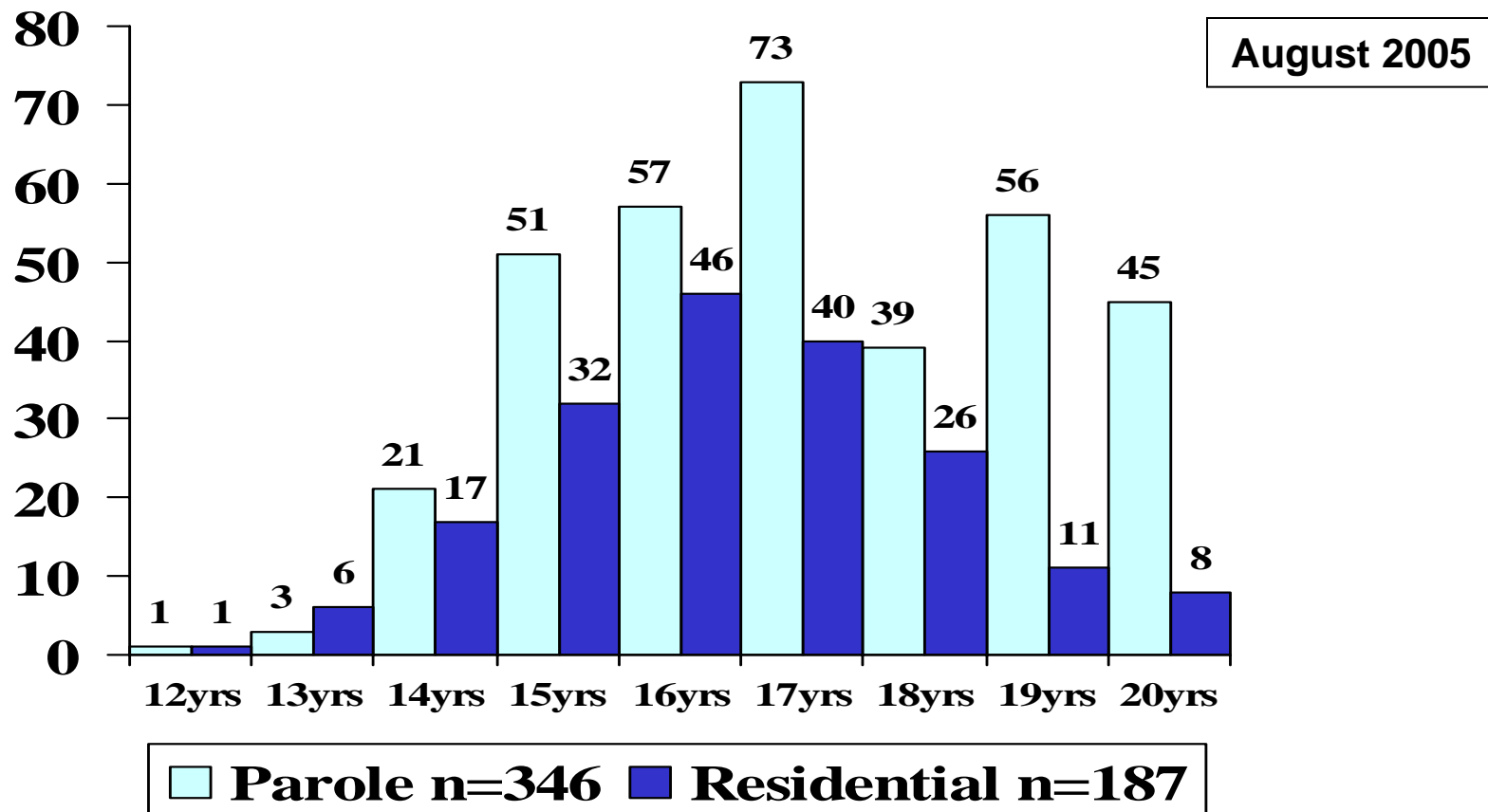
Sex Offenders All Offenders



Data source: Client Activity Tracking system

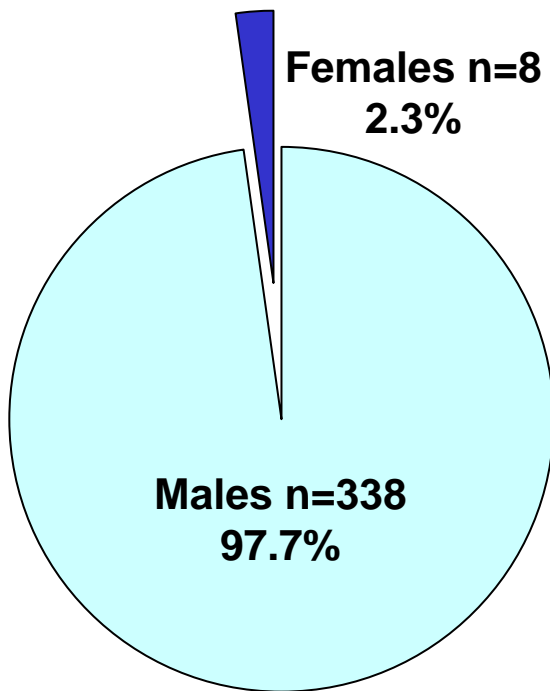
# Public Safety: DSHS Supplementary Data

## Age Range of JRA Sex Offenders



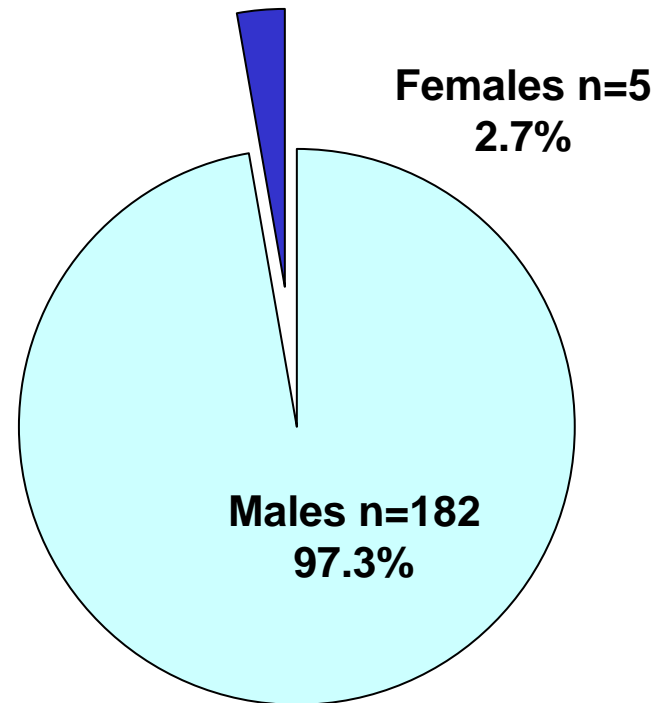
# Public Safety: DSHS Supplementary Data

## Gender of JRA Sex Offenders



**Parole**

**August 2005**



**Residential**